

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE				
							APPLICANT(S)					
CLAIMS												
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT								
IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP	
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TOTAL IND.						TOTAL IND.						
TOTAL DEP.						TOTAL DEP.						
TOTAL CLAIMS						TOTAL CLAIMS						

Handwritten notes and markings on the form include:

- Large diagonal lines crossing out rows 1-30 on the left and rows 51-80 on the right.
- Handwritten numbers: 3, 5, 12, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.
- Handwritten text: "3", "5", "12", "17", "18", "19", "20", "21", "22", "23", "24", "25", "26", "27", "28", "29", "30", "31", "32", "33", "34", "35", "36", "37", "38", "39", "40", "41", "42", "43", "44", "45", "46", "47", "48", "49", "50", "51", "52", "53", "54", "55", "56", "57", "58", "59", "60", "61", "62", "63", "64", "65", "66", "67", "68", "69", "70", "71", "72", "73", "74", "75", "76", "77", "78", "79", "80", "81", "82", "83", "84", "85", "86", "87", "88", "89", "90", "91", "92", "93", "94", "95", "96", "97", "98", "99", "100".